CONTRACT DISCREPANCY REPORT  Report Number: CDR FY18-0003			1. CONTRACT NUMBER DROIGSA-06-00005 HSCEDM17FIG272 Date: 02/28/2018	
	DAT	ES		
CONTRACTORNOTIFICATION 03/02/2018	CONTRACTOR RESPONSE BY:3/31/2018	RETURNEDBY CONTRACTOR		
4. DISCREPANCY OR PROBLEM (De	scribe in Detail: Include reference in F	PWS/Directive: Attach conti	muation sheet if necessary.)	
Prevention, Section V. F, state receive continuous one-to-on See Attached Memo  Corrective Actions:				
5. SIGNATURE OF CONTRACTING O	officer's representative(co			
<u>i</u> 6. TO:( <i>COR</i> )		7.FROM: (Contractor)		
8. CONTRACTOR RESPONSE AS TO C CONTINUATION SHEET IF NECESS.				

The 2011 Performance-Based National Detention Standards, *Significant Self-harm and Suicide Prevention*, Section V. F, states: "All suicidal detainees placed in an isolated confinement setting will receive continuous one-to-one monitoring..."

The following time lime was established by the IHSC Health Services Administrator regarding the below described incident that occurred on February 7 - 8, 2018:

- February 7, 2018 at approximately 1928 an order was written to place a detainee on CONSTANT 1:1 WATCH/MENTAL HEALTH OBSERVATION.
- Intake nurse provided a copy of the form placing the detainee on 1:1 constant watch to the intake officer who subsequently gave the form to another Core Civic officer who escorted the detainee to segregation at approximately 2045.
- At approximately 2045 the detainee arrived in segregation and was placed in Cell 106 No Officer was posted for the ordered 1:1 Constant Watch.
- February 8, 2018 at approximately 0940 an RN was making segregation rounds and noted that no officer was providing 1:1 Constant Watch. The RN remained with the detainee, and notified the CoreCivic Supervisor, who implemented the 1:1 Constant Watch.
- The form placing the detainee on 1:1 constant watch was located on a table in segregation.
- Approximately 13 hours lapsed in which the medically-ordered, constant, one-on-one observation did not occur.

9. SIGNATURE OF CONTRACTO	OR REPRESENTATIVE		10. DATE
			J
12. GOVERNMENT ACTIONS (	Payment withholding, cure notice, showcau	se, other.)	
	CLOSI	EOUT	
CONTRACTOR	NAME AND TITLE	SIGNATURE	DATE
NOTIFIED			
COR			
CONTRACTING OFFICER			
I OFFICER			